

## UNITEL JEATES DEPARTMENT OF COMMERCE Patent and Trademark Office Address: COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20231

FILING DATE

FIRST NAMED APPLICANT

ATTORNEY DOCKET NO.

			EXAMINER	
			ART UNIT	PAPER NUMBER
				10
		DA	TE MAILED:	
INTERV	IEW SUMMARY			
All participants (applicant, applicant's representative, PTO personne	):			
(1) CAURIE 141CC	(3)			
(1) CHURIE 14/CC (2) AALPH GITOMEN	(4)			
Date of Interview 6/18/03	(4)			
Type: Telephonic   Percent (committee in the committee in	<del>-</del>			
Type: Personal (copy is given to applicant				
Exhibit shown or demonstration conducted: Yes Ano If yes, to	rief description:			
Description of the general nature of what was agreed to if an agreement $ANCNT$ $NCCT$ $NCCT$	ent was reached, or any			
( A fuller description, if necessary, and a copy of the amendments, if a must be attached. Also, where no copy of the amendments which wou attached.)	ailable, which the examulation which the examulation allower the claims allower.	niner agreed owable is a	d would render th vailable, a summ	ne claims allowable any thereof must be
<ol> <li>It is not necessary for applicant to provide a separate record of t</li> </ol>	he substance of the inte	rview		
Unless the paragraph above has been checked to indicate to the contr IS NOT WAIVED AND MUST INCLUDE THE SUBSTANCE OF THE IN action has are ready been filed, APPLICANT IS GIVEN ONE MONTH SUBSTANCE OF THE INTERVIEW.	ary. A FORMAL WRITT	EN RESPO	DNSE TO THE L 13.04). If a respo D FILE A STATEM	AST OFFICE ACTION onse to the last Office MENT OF THE
2. Since the Examiner's interview summary above (including any arrejections and requirements that may be present in the last Officis considered to fulfill the response requirements of the last Offic the interview unless box 1 above is also checked.	ttachments) reflects a co e action, and since the o e action. Applicant is no	omplete res claims are r ot relieved f	sponse to each on now allowable, the from providing a	of the objections, is completed form separate record of
Examiner Note: You must sign this form unless it is an attachment to ar	nother form	/	Melo	1127
ORM PTOL-413 (REV.1-96)		,		•